## SHELBY COUNTY SCHOOLS – OFFICE OF FACILITIES PLANNING Stadium Request Form

(Must be received by Facilities Planning at least 30 days prior to event/activity)

NAME OF ORGANIZATIONPERSON RESPONSIBLE					
	PERSU	N RESPUI	NSIBLE		
NAME	PHONE				
ADDRESS		DATE			
			ZIPCODE		
	SS:				
ONL The following must 1) Copy of proof of	Y COMPLETE IF EVI be placed on file in the of General Liability I	ENT IS A NON-SC office of Facility I nsurance?	CHOOL RELATED AC Planning before issuance	e of permit:	
APPLICANT SIGNATURE					
STADIUM REQU	ESTED				
AREA REQUESTED		EXPECTED ATTENDANCE			
		ADMISSION			
DATE (s) OF REQUEST  TYPE OF ACTIVITY		CHARGE			
(Provide Agenda)			TIME OF REQUEST		
Method o	f Pavment: Certified		160 SOUTH HOLLYV Order – Cash – Person — DATE		
SCIAA Athletic Mana	iger Signature*				
Trans of Francis	**For Facilities Planning Staff Only**				
Type of Event	SCS-School	SCIAA	Youth	Other	
2. We have the ri	ector's approval must be	the field due to rai	n or damage conditions quest can be processed ar ies Planning for processing	nd Permit issued.	

Shelby County Schools does not discriminate in its programs or employment on the basis of race, color, religion, national origin, handicap/disability, sex, or age.